

UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY

UNITED STATES OF AMERICA, : Docket No.: 07-00902

Plaintiff, : Criminal Action

v.

STEVEN BYRD, :

Defendant. :

ORDER

This matter coming before this Court by Alexander W. Booth., attorney for defendant, Steven Byrd and Assistant United States Attorney, Jacob Elberg appearing on behalf of the government and the Court having considered the moving papers of counsel and it appearing that good cause is shown for entry of this Order

IT IS on this 28 day of March, 2008

ORDERED that the United States of America transfer the heroin in question for testing to, NMS Labs, 3701 Welsh Road, Willow Grove, Pennsylvania 19090, (215) 366-1328 attn: Susan O'Neill, per CJA 21 Voucher that was executed on December 20, 2007 (See Exhibit A).

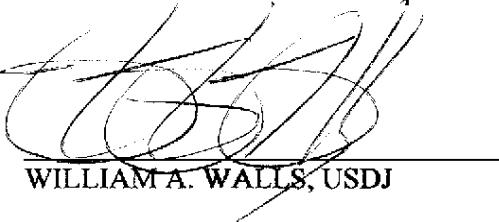

WILLIAM A. WALLS, USDJ

EXHIBIT A

CJA 21 AUTHORIZATION AND VOUCHER FOR EXPERT AND OTHER SERVICES (Rev. 1/06)

1. CIR./DIST./DIV. CODE	2. PERSON REPRESENTED <i>Steven Byrd</i>		VOUCHER NUMBER
3. MAG. DKT./DEF. NUMBER <i>07-3575-03</i>	4. DIST. DKT./DEF. NUMBER	5. APPEALS DKT./DEF. NUMBER	6. OTHER DKT. NUMBER
7. IN CASE/MATTER OF (Case Name) <i>US v. Steven Byrd</i>	8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal	9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other	10. REPRESENTATION TYPE <i>(See Instructions)</i> <i>CC</i>
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section). If more than one offense, list up to five major offenses charged, according to severity of offense. <i>Title 21, USC § 841(a)(1) and 841(b)(1)(C) and 18 U.S.C. § 2</i>			
REQUEST AND AUTHORIZATION FOR EXPERT SERVICES			
12. ATTORNEY'S STATEMENT As the attorney for the person represented, who is named above, I hereby affirm that the services requested are necessary for adequate representation. I hereby request: <input checked="" type="checkbox"/> Authorization to obtain the service. Estimated Compensation and Expenses: \$ <i>6,000.00</i> OR <input type="checkbox"/> Approval of services already obtained to be paid for by the United States pursuant to the Criminal Justice Act. (Note: Prior authorization should be obtained for services in excess of \$500, excluding expenses) Signature of Attorney <i>Alexander W. Booth</i> Date <i>12/14/07</i> ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS <i>Alexander W. Booth 512-42 Street Union City, NJ 07087</i> Telephone Number: <i>201-816-4949</i>			
13. DESCRIPTION OF AND JUSTIFICATION FOR SERVICES (See Instructions) <i>see attached certification</i>			
14. TYPE OF SERVICE PROVIDER			
01	<input type="checkbox"/> Investigator	15	<input type="checkbox"/> Other Medical
02	<input type="checkbox"/> Interpreter/Translator	16	<input type="checkbox"/> Voice/Audio Analyst
03	<input type="checkbox"/> Psychologist	17	<input type="checkbox"/> Hair/Fiber Expert
04	<input type="checkbox"/> Psychiatrist	18	<input type="checkbox"/> Computer (Hardware/Software/Systems)
05	<input type="checkbox"/> Polygraph	19	<input type="checkbox"/> Paralegal Services
06	<input type="checkbox"/> Documents Examiner	20	<input type="checkbox"/> Legal Analyst/Consultant
07	<input type="checkbox"/> Fingerprint Analyst	21	<input type="checkbox"/> Jury Consultant
08	<input type="checkbox"/> Accountant	22	<input type="checkbox"/> Mitigation Specialist
09	<input type="checkbox"/> CALR (Westlaw/Lexis, etc.)	23	<input type="checkbox"/> Duplication Services <i>(See Instructions)</i>
10	<input checked="" type="checkbox"/> Chemist/Toxicologist	24	<input type="checkbox"/> Other (Specify)
11	<input type="checkbox"/> Ballistics		
13	<input type="checkbox"/> Weapons/Firearms/Explosive Expert		
14	<input type="checkbox"/> Pathologist/Medical Examiner		
CLAIM FOR SERVICES AND EXPENSES			
16. SERVICES AND EXPENSES <i>(Attach itemization of services with dates)</i>		AMOUNT CLAIMED	MATH/TECHNICAL ADJUSTED AMOUNT
a. Compensation			ADDITIONAL REVIEW
b. Travel Expenses (lodging, parking, meals, mileage, etc.)			
c. Other Expenses			
GRAND TOTALS (CLAIMED AND ADJUSTED):			
17. PAYEE'S NAME AND MAILING ADDRESS			
TIN: _____			
Telephone Number: _____			
CLAIMANT'S CERTIFICATION FOR PERIOD OF SERVICE FROM _____ TO _____			
CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment Number _____		<input type="checkbox"/> Supplemental Payment	
I hereby certify that the above claim is for services rendered and is correct, and that I have not sought or received payment (compensation or anything of value) from any other source for these services.			
Signature of Claimant/Payee _____ Date _____			
18. CERTIFICATION OF ATTORNEY I hereby certify that the services were rendered for this case.			
Signature of Attorney _____ Date _____			
APPROVED FOR PAYMENT - COURT USE ONLY			
19. TOTAL COMPENSATION	20. TRAVEL EXPENSES	21. OTHER EXPENSES	22. TOTAL AMOUNT APPROVED/CERTIFIED
2. <input type="checkbox"/> Either the cost (excluding expenses) of these services does not exceed \$500, or prior authorization was obtained. <input type="checkbox"/> Prior authorization was not obtained, but in the interest of justice the Court finds that timely procurement of these necessary services could not await prior authorization, even though the cost (excluding expenses) exceeds \$500.			
Signature of Presiding Judge _____ Date _____ Judge Code _____			
24. TOTAL COMPENSATION	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMOUNT APPROVED
28. PAYMENT APPROVED IN EXCESS OF THE STATUTORY THRESHOLD UNDER 18 U.S.C. § 3006A(e)(3)			
Signature of Chief Judge, Court of Appeals (or Delegate) _____ Date _____ Judge Code _____			

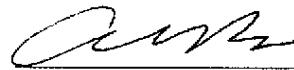
UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW JERSEY

UNITED STATES OF AMERICA, :
Plaintiff, : Criminal No.: 07-3575-03
v. :
STEVEN BYRD, : **CERTIFICATION**
Defendant. :

I, Alexander W. Booth, hereby certify as follows:

1. I am an attorney and represent the defendant Steven Byrd in this matter.
2. The United States' laboratory Report alleges that there were 60.6 grams of heroin involved in this matter with only 2.2 grams of actual heroin.
3. The relative guideline standard here is over 60 grams.
4. I intend to argue that there was less than 60 grams involved and need my own lab report to effectively make that argument.
5. This issue was put on the record during Mr. Byrd's guilty plea proceedings on November 8, 2007 where it was agreed that the defendant could proceed with this argument after securing an independent analysis.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false then I am subject to punishment.



ALEXANDER W. BOOTH, ESQ.

Dated: December 14, 2007